

Missouri Ethics Commission (MEC)

PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:	Q

Statement of Committee Organization

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1.	Statement Information		
	00/06/0046	- gap - c	
	Date.		
	Type: New Amended (if amending, enter MEC ID C1)	61024 & section changed 3	
	The state of the s	The state of the s	
2.	Committee Information		
	Committee to Elect Jean Evans		
	Name of Committee		
	9180 Garber Rd, St. Louis, MO 63126	₁ 314 ₁ 229-0827	
	Committee Mailing Address, City, State, & Zip	Telephone Number	
	Committee maning Address, city, state, or Elp	Ct. Lauria Country	
		St. Louis County	
	}	County Clerk or Board of Election Commissioners	
	Committee Tune: Committee Condidate Continuing	(DAC) Dobt Sonvice Fundamentary Political Party	
	Committee Type: Campaign Candidate Continuing (PAC) Debt Service Exploratory Political Party		
2	3. Treasurer/Deputy Treasurer Information		
3.	3. Heasurer/Deputy Heasurer Information		
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
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	Treasurer's Mailing Address, City, State, & Zip	Telephone Number	
	Sherri Rogers		
		Deputy Treasurer's Email Address (optional)	
	Deputy Treasurer's Name (if one appointed)		
	1734 Clarkson Rd, Box 238, Chesterfield, MO 63017	(314)808-5600 (314)	
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep: Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number	
	1886 Sight (17) Sight of Property (Property States) Construction (19)		
Δ	Additional Committee Information		
••		The state of the s	
	Additional Committee Officer's Name Witte (igany)	Additional Committee Officer's Mailing Address, City, State, & Zip	
		en e	
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, City, State, & Zip	
	CANDIDATES. D berrand the control of the	-2 Table () Constitution of the last of the	
_	CANDIDATES: Do you have more than one candidate committee		
5.	5. Official Bank Account Information (required by all committees)		
	The state of the s		
	Name & Mailing Address, City, State, & Zip of Financial Institution	Account Name Account Number	
_			
6.	Candidate Supported or Opposed (candidate committees must	t include self, if candidate)	
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees Only)	
	The attracting that cas, only state a zip of canadate		
	Election Date Office Sought & Political Subdivision	Political Party Support or Oppose	
7.	Ballot Measure Supported or Opposed (campaign committees	must complete this section)	
	Name of Ballot Measure	Election Date & Political Subdivision Support or Oppose	
	Marie Contract and restrict to the state of		
8.	Signature(s) Check certification(s) & sign (required by all com	imittees)	
	[] Laffing and attack when a selection that information and first in this area and a selection		
	I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I		
	further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.		
	which is the state of the state		
	part VIV		
	Committee Treasurer	Candidate (Candidate Committees Only)	